



National Youth Service Day
April 21-23, 2006

PROJECT INFORMATION FORM

Return to Claire Laver at claire.laver@dc.gov or (fax) 202-727-9198
by **Friday, March 24, 2006.**

Please type or write legibly. Electronic version available soon at www.serve.dc.gov.

| | | | | | | | | | | |
|---------------------------------------|---|--------------------------------------|-------------------------------------|-------------------------------|-------------------------------------|------------------------------------|-----------------------------------|---------------------------------------|--|--|
| Contact Person: _____ | E-mail: _____ | | | | | | | | | |
| Organization: _____ | Phone: _____ | | | | | | | | | |
| Address: _____ | Fax: _____ | | | | | | | | | |
| Youth Contact Person: _____ | Age: _____ | | | | | | | | | |
| E-mail: _____ | Home Phone: _____ | | | | | | | | | |
| Organization Type: | <table border="0"><tr><td><input type="checkbox"/> Faith-based</td><td><input type="checkbox"/> Non-profit</td><td><input type="checkbox"/> Club</td></tr><tr><td><input type="checkbox"/> Government</td><td><input type="checkbox"/> Education</td><td><input type="checkbox"/> Business</td></tr><tr><td colspan="3"><input type="checkbox"/> Other: _____</td></tr></table> | <input type="checkbox"/> Faith-based | <input type="checkbox"/> Non-profit | <input type="checkbox"/> Club | <input type="checkbox"/> Government | <input type="checkbox"/> Education | <input type="checkbox"/> Business | <input type="checkbox"/> Other: _____ | | |
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| <input type="checkbox"/> Government | <input type="checkbox"/> Education | <input type="checkbox"/> Business | | | | | | | | |
| <input type="checkbox"/> Other: _____ | | | | | | | | | | |

Project Description: (Use no more than one additional page if necessary.)

Total Participants Anticipated: _____
Youth (under age 25) Anticipated (out of total): _____

Project Location (complete street address): _____

Date: _____ Start Time: _____ End Time: _____

On-site Contact Person: _____ Cell Phone: _____